

# Exhibit Q

*Report of Carolyn C. Thompson, M.D.*

## **CURRICULUM VITAE**

Carolyn Crump Thompson, M.D.  
2201 Murphy Avenue, Suite 310  
Nashville, TN 37203  
615-341-0991

### **Employment**

Carolyn C. Thompson, M.D., P.C. 11/1999 - present  
Private practice of obstetrics and gynecology

Women's Health Alliance 8/1997-11/1999  
Private practice of obstetrics and gynecology

### **Specialty Training**

University of Missouri, Kansas City 7/1993-6/1997  
Department of Obstetrics and Gynecology  
Internship and Residency

### **Professional Appointments**

Affiliated Assistant Professor, University of Tennessee Health Science  
Center, College of Medicine, Department of Clinical Medical  
Education 10/2014-present  
Chair, Department of Obstetrics and Gynecology  
Summit Medical Center 5/05 – 4/09  
Instructor, University of Missouri, Kansas City 7/1993-6/1997  
Department of Obstetrics and Gynecology

### **National Professional Certification**

Diplomate, National Board of Medical Examiners 1994  
Specialty Certification  
Diplomate, National Board of Obstetrics and Gynecology 1999

### **State Licensure**

States of Tennessee (active), Missouri and Kansas (expired)

### **Medical Education**

University of Tennessee Center for the Health Sciences College of Medicine  
Doctor of Medicine 6/1993

### **Undergraduate Education**

University of Tennessee, Knoxville 1985-1988  
Bachelor of Arts, Cum Laude 1988

### **Specialty Procedures**

Robotic-assisted laparoscopic surgical procedures  
Single-incision pelvic floor repair procedures  
Laparoscopic total and supracervical hysterectomy

Transobturator suburethral sling placement  
Essure hysteroscopic sterilization

**Professional Organizations**

Fellow, American College of Obstetricians and Gynecologists  
Fellow, American Congress of Obstetricians and Gynecologists  
Member, American Society of Colposcopy and Cervical Pathology  
Member, American Urogynecological Society  
Member, Society of Laparoendoscopic Surgeons  
Member, Kansas City Gynecological Society  
Fellow, Youngblood Society

**Volunteer and Community Activities**

Volunteer surgeon, Chikondi Health Foundation, Lumbadzi, Malawi 6/2015  
Board Member, First Steps 2012-present  
Executive Committee 1/2014-present  
Women's Political Collaborative 10/2014-present  
Volunteer, Gilda's Club 2013-present  
University of Tennessee Alumni Association Network Board 2013-2014  
Volunteer surgeon Health Talents International Clinica Ezell  
Montellano, Guatemala 9/06, 9/07, 9/08, 9/12  
Volunteer physician West End United Methodist Church mission trips to  
Honduras, Nicaragua and Guatemala 7/02, 1/05  
Susan G. Komen Nashville Affiliate Grant Review Board 2007-2009

**Research**

Prevalence of Certain Sexually Transmitted Diseases in Women on  
DepoProvera with Abnormal Bleeding Patterns Resident research  
project completed 5/97

National Institute of Health Medical Student Research Grant  
The Effects of the Inhibition of Phospholipase A2 on Cerebrovascular  
Reactivity in the Newborn Pig (under direction of C.W. Leffler, Ph.D.,  
Professor of Physiology and Biophysics, University of Tennessee,  
Memphis, June-August 1990)

Catheter-Associated Fungemia in Patients with Acquired  
Immunodeficiency Syndrome: Species Verification with Molecular  
Probing (research assistant for W.S. Riggsby, Ph.D., Professor of  
Microbiology, University of Tennessee, Knoxville, June-December 1988)

**Scientific Publications**

Peppler, R.D., and C.C. Thompson. "Anatomy, Embryology, and  
Physiology of the Fallopian Tube" in: Extrauterine Pregnancy: Clinical  
Diagnosis and Management. T.G. Stovall and F.W. Ling, eds. McGraw-  
Hill, Inc., New York. 1993. Chapter 2.

Leffler, C.W., C.C. Thompson, W.M. Armstead, R. Mirro, M. Shibata, D.W. Busija. Superoxide scavengers do not prevent ischemia-induced alteration of cerebral vasodilation in piglets. *Pediatr Res.* 1993 Feb;33(2):164-70.

Leffler, C.W., R. Mirro, C.C. Thompson, W.M. Armstead, M. Shibata, M. Pourcyrous, and O. Thelin. Activated Oxygen Species Do Not Mediate Hypercapnia-Induced Cerebral Vasodilation in Newborn Pigs. *American Journal of Physiology.* 261 (Heart Circ. Physio. 30): H335-H342. 1991.

## **Expert Report**

My name is Carolyn C. Thompson, MD. I am an Affiliated Assistant Professor in Obstetrics and Gynecology in the College of Medicine, University of Tennessee Health Sciences Center. I earned my Doctorate of Medicine from the University of Tennessee Health Sciences Center in 1993 and completed my internship and residency at the University of Missouri, Kansas City in 1997. I am a Diplomate of the American Board of Obstetrics and Gynecology and am a Fellow of the American College and the American Congress of Obstetricians and Gynecologists. I have practiced General Obstetrics and Gynecology in the private practice setting in Nashville, Tennessee since 1997. My fee is \$500 per hour. In the past 4 years, I have been deposed as an expert in one medical malpractice case.

### **Opinions**

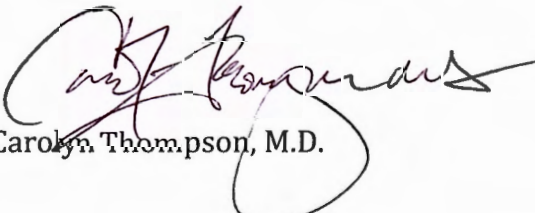
The menstrual period (henceforward referred to as the "period") is the physiological shedding of the endometrium, or uterine lining, following the failure of a fertilized egg to implant in the uterine lining (pregnancy). The average age of onset of menses (menarche) in the US is 12.5 years of age; the average age of cessation of menses (menopause) is 51 years of age. In the intervening years, exclusive of pregnancy and hormonal suppression of menses, women typically menstruate every 28 days on average. A normal period lasts from 3-7 days, during which time most women must use some type of protection to prevent their menstrual blood from staining their clothing. This is typically referred to as "sanitary protection" and may include pads (also called "napkins"), which are worn against the vulva; tampons, which are worn inside the vagina; and menstrual cups, which are also worn inside the vagina.

Cultural norms dictate that the vulva and vagina are considered "private parts," in that they are areas of the body not usually viewed by or exposed to others except in clinical or intimate situations. A request for private body parts to be revealed to someone other than a clinician or an intimate partner is typically repugnant to an individual.

Cultural norms also dictate that bodily fluids (including urine, feces, semen, mucus, and menstrual blood) are considered taboo and not typically to be visualized by others except in specific clinical situations. In fact, most women are reluctant even to schedule a gynecologic exam during their menses.

April 25, 2016

Respectfully submitted,



Carolyn Thompson, M.D.